HEALTH SYSTEMS RESEARCH INSTITUTE
Thailand
2008-2010

"Decision making based on knowledge gained from past experience may not be able to handle health problems in the changing global and national context. Increasing health system complexity needs more knowledge as well as empowerment of people and decision makers for knowledge utilization."

Dr Pongpisut JONG-UDOMSUK
Director, Health Systems Research Institute (HSRI)

The Global and National Contexts shaping the HSRI

The world has changed dramatically. Following by the determinants of health threats have become broader, so has the range of players with a stake in the health system agenda. At the same time, the health system is dynamic nationally and globally. Among the others, there are a number of specific challenges as followings :

▶ There is a lack of knowledge of which health system strengthening strategies are effective.

▶ Health-system solutions must respond to local contexts and values.

▶ Capacity to produce health policy and systems research (HPSR) is weak and fragmented.

▶ Institutional capacity within the country to apply health systems knowledge to either national or local policy problems is weak.

The HSRI's origin, purpose and strategy, set out in this country, aims to address these critical challenges.

The origin and purpose

Health Systems Research Institute (HSRI) was established in 1992 by the Health Systems Research Institute Act, 1992. It is an autonomous state agency. In accordance with the national social and economic contexts, its objectives are to create and stimulate the generation and synthesis of policy relevant health systems knowledge, encompassing evidence, tools, methods and interventions.

Briefly stated, aiming at strengthening the health system, HSRI has a mandate to sponsoring national processes to support evidence-informed policy decision-making, including the synthesis of issue-focused policy briefs and deliberations. This is through the integration of research and knowledge into health-system-strengthening interventions.

HSRI Governance and Infrastructure

HSRI governance includes the HSRI Board, chaired by the Public Health Minister and HSRI Director serves as the secretariat. The Board consists of 17 high level executive members, including 9 representatives of concerned government offices and 7 senior experts. The Board shall supervise and provide policy guidance for HSRI strategy and direction, as well as monitor and evaluate HSRI's performance. To date, its governance also includes the new watchwords i.e., cooperation, transparency, accountability, and preparedness.

HSRI's Architecture and Organizational Structure

HSRI's architecture is intentionally designed to be autonomous, working in partnerships with its alliances and engagement of multi-stakeholders including policy maker, other potential research users and civil society. At the same time, HSRI keeps its functional and organizational structure small, simple and flexible. This makes it easily changed to facilitate dynamics of the health system and the national context. There are only 30 staffs with small government budget from 16.2 million Baht in 1993, up to 138.43 million Bath in 2002, and 85.5 million Baht in 2008. Meanwhile, fundraising from other sources is gradually increased from 2.6 million Baht in 1994 up to 267.98 million Baht in 2007.

"HSRI does not have the capacity to implement. Its major concern is what to implement."
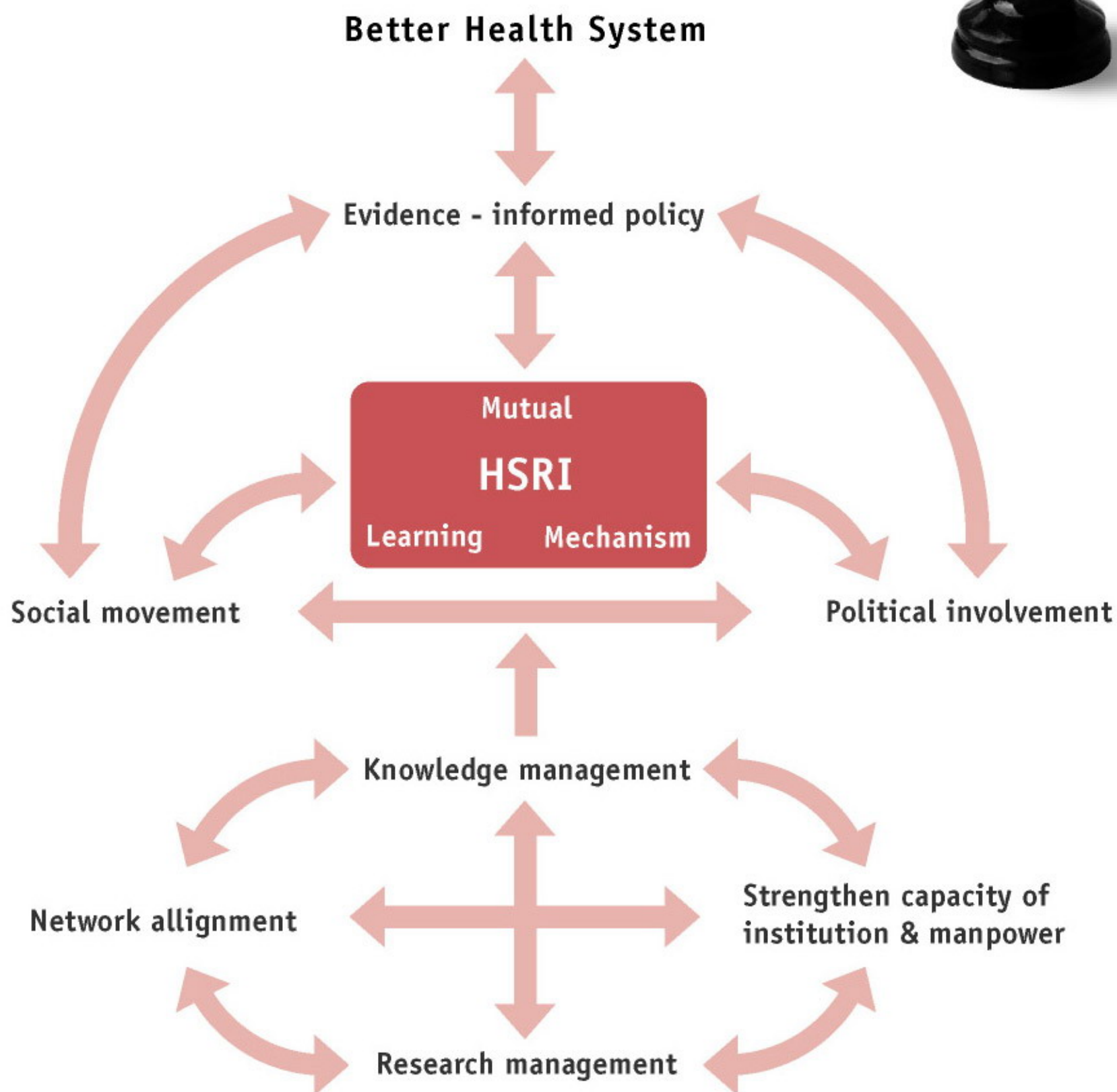
Figure 1 HSRI's Architecture

Better Health System

Evidence - informed policy

HSRI
Mutual
Learning   Mechanism

Social movement

Political involvement

Knowledge management

Network allignment

Strengthen capacity of institution & manpower

Research management

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Figure 2 HSRI's Organizational Structure

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                    │   HSRI Board    │
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                             │
                    ┌────────┴────────┐
                    │    Director     │
                    └────────┬────────┘
              ┌──────────────┴──────────────┐
   ┌──────────────────────┐   ┌──────────────────────────────┐
   │                      │   │ Supportive                   │
   │ Research management  │   │ ▶ General administration     │
   │                      │   │ ▶ Information (library,IT)    │
   │                      │   │ ▶ Public Communication        │
   └──────────────────────┘   └──────────────────────────────┘
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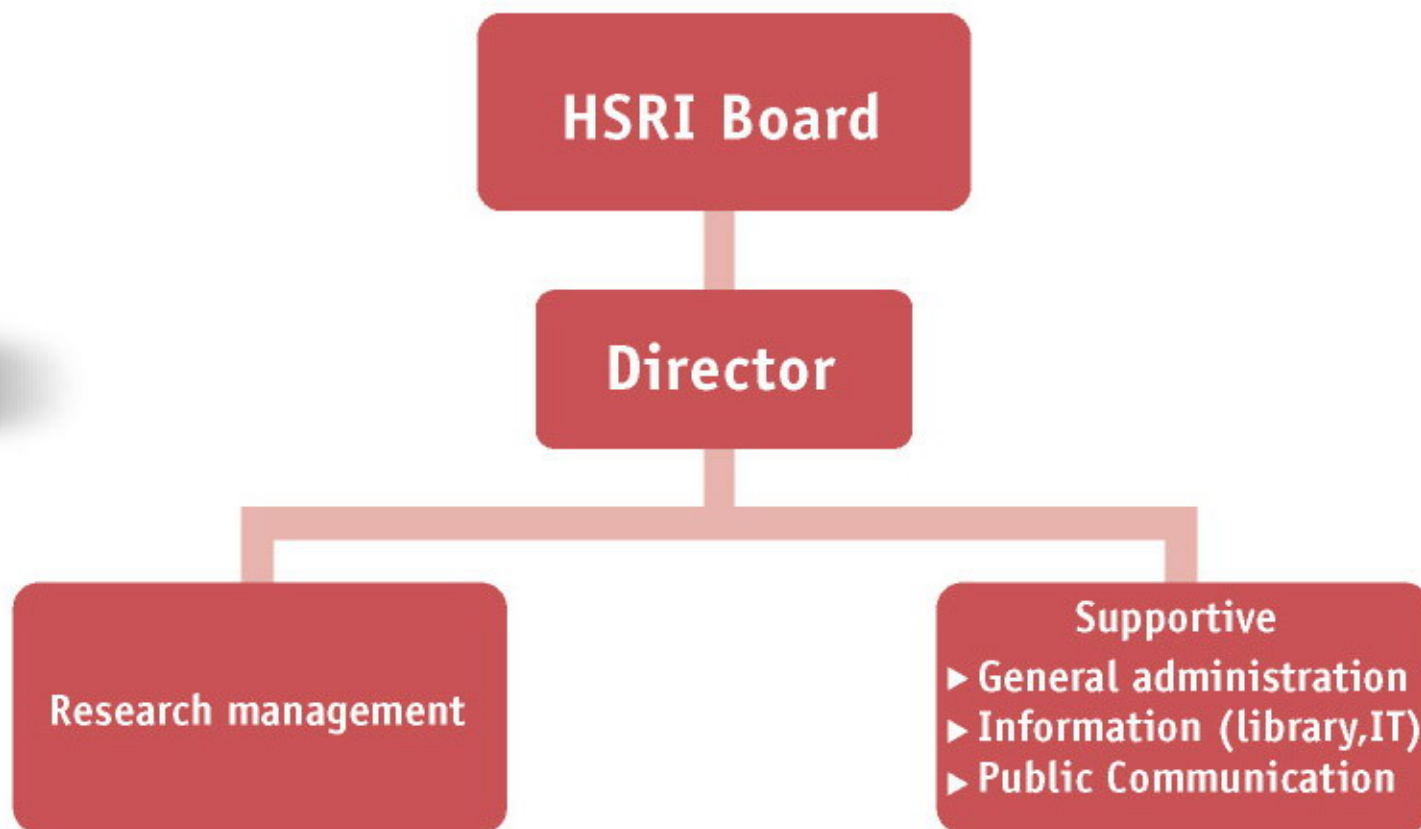
Figure 3 HSRI annual budget (million Baht), 1993-2008.

Gov. Budget: 1993: 16.2, 1994: 27.29, 1995: 42.29, 1996: 60.29, 1997: 71.29, 1998: 60, 1999: 60, 2000: 65.12, 2001: 72.86, 2002: 138.43, 2003: 109.93, 2004: 96.86, 2005: 88.69, 2006: 78.97, 2007: 81.4, 2008: 85.5

Other source: 1994: 2.6, 1995: 10.92, 1996: 14.43, 1997: 6.71, 1998: 13.87, 1999: 8.45, 2000: 9.3, 2001: 37.13, 2002: 51.23, 2003: 29.14, 2004: 60.65, 2005: 205.72, 2006: 211.42, 2007: 267.98

HSRI's Outstanding Achievements since 1992.

Timeline of HSRI's collective outstanding achievements
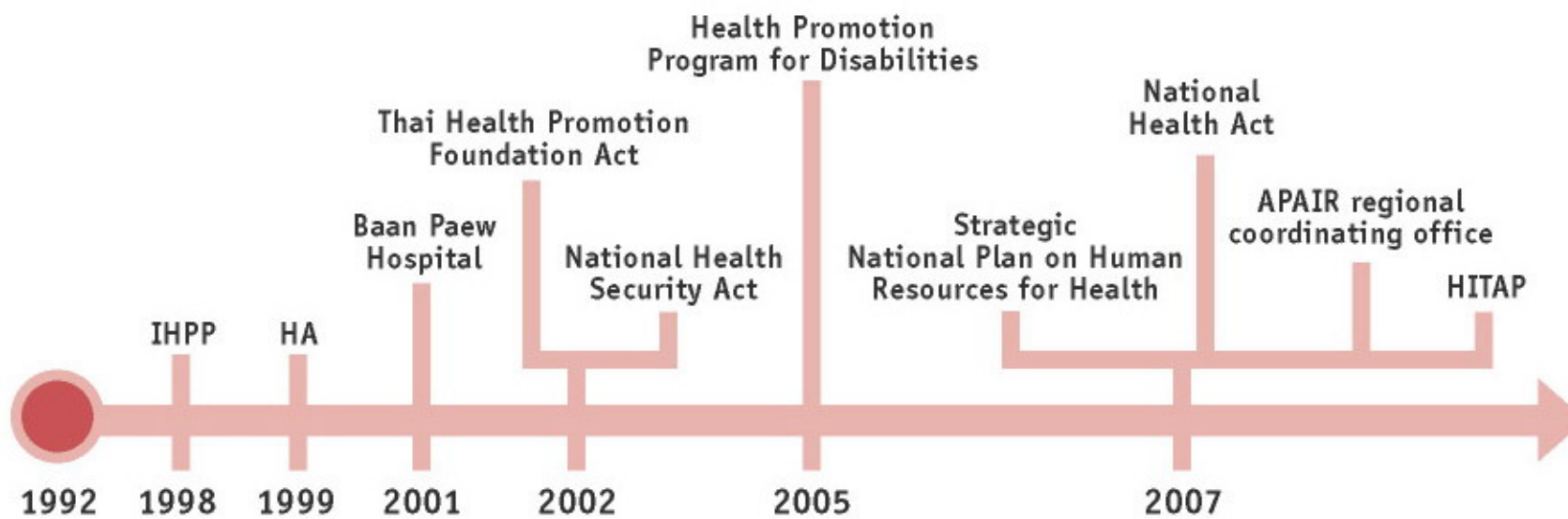
HA : Hospital Quality Improvement and Accreditation
IHPP : International Health Policy Program
HITAP : Health Intervention and Technology Assessment Program
APAIR : Asian Partnerships for Avian Influenza Research

Phase 1, **1992-1998,** HSRI's performance was emphasized on the development of health policy and system research (HPSR). There were a number of HPSR studies conducted both in-house and outsourcing, resulting in outstanding achievements that contributing to health system reform, subsequently.

Phase 2, **1999-2004** and **Phase 3,** **2005-2007**, its performance was based on the priority studies for health system reform and called for active participation of local communities and civic groups at all levels. This aimed to support and to facilitate the formulation of the National Health Act. A pivotal mechanism, Health System Reform Office (HSRO), was then established to be a coordinating office and took up a lead role launching a learning process among local health communities and civic groups.

By that time, there were two main health research system changes. Firstly, HSRI played a new role as a health research management institute. "Research management" concept and skill were introduced and developed to nurture its personnel and the institute itself. This is to build its capacity to work efficiently with its partners. And secondly, there were a number of research alliances and the communitiesí network established. On one hand, a number of health research studies were conducted by the alliances. On the other hand, the studies were fragmented and the HPSR focus was losing.

Nevertheless, among the others, HSRI's collective outstanding achievements include,

- ▶ Providing support for the establishment of International Health Policy Program (IHPP) in Thailand since 1998.
- ▶ Establishment of Institute of Hospital Quality Improvement and Accreditation (HA) since 1999.
- ▶ Providing technical support for the establishment of autonomous public hospital: Baan Paew Hospital since 2001.
- ▶ Providing technical support for the enactment of the Thai Health Promotion foundation Act 2001.
- ▶ Providing technical support for the enactment of the National Health Security Act 2002 (establishment of Universal Healthcare Coverage Scheme or 30 Baht Scheme).
- ▶ The 3rd National Health Examination Survey 2003-2004.
- ▶ Providing technical support for the establishment of a pre-registration system for the reimbursement of cost of ambulatory services of Civil Servant Medical Benefit Scheme (CSMBS) since 2006.
- ▶ Strengthening health care system for the disabled and empowerment of networks of disabled through health promotion program for the disabilities since 2005.
- ▶ Providing technical support for the development of "Strategic Plan for the Decade of National Human Resources for Health Development 2007-2016."
- ▶ Providing technical support and mobilizing civic support for the enactment of the National Health Act 2007 and establishment of the National Health Commission Office (NHCO).

► Providing support for the establishment of Health Intervention and Technology Assessment Program (HITAP) 2007.

► Establishment of Asian Partnerships for Avian Influenza Research (APAIR) 2007.

At the time when the world and the nation face many new and recurring threats, the ambitious aim of the HSRI strategic plan, 2008-2010 is to support and mobilize health system research for building and/or strengthening an efficient health system with more equitable health outcome. It is expected that a successful implementation of the HSRI strategic plan, shall serve the national health system as well as the national health security.

"Policy makers trust a high quality, evidence based knowledge deriving from a good knowledge management system. This is not only a conventional hypothesis, but also a simply ruler thought."

HSRI Strategic Plan, 2008-2010

"Better Knowledge Management FOR Better Health System"

Vision

Health Systems Research Institute is a key organization in knowledge management of which the process and output lead to a sustainable health system reform.

"Better knowledge management for better health system"

Mission

The mission of HSRI is to manage knowledge to strategically support health system development by working cooperatively with research alliances and engagement of stakeholders including policy-decision makers, potential research users, the media and the general public.

Strategic Goals

Strengthening Thai health system to achieve its better performance including efficiency, quality and equity objectives.

Strategic Directions and Objectives

1. HSRI will sponsor policy development processes to support evidence-informed policy decision-making, including the synthesis of issue-focused policy briefs and deliberations on priority health problems. This is through the integration of research into health-system-strengthening interventions.

2. HSRI will create effective communication mechanisms at all levels. HSRI will focus more on the research/policy interface and dialogue, to clarify and articulate a research agenda for delivering information and knowledge on health system to policy makers, academicians and the general publics.

3. HSRI and its alliances will generate and manage health research based on good governance practices and emphasize at applying knowledge for health policy formulation. HSRI emphasizes the need to build capacity at both individual and institutional levels. There should be increased capacity with respect to all steps of research management, including priority identification, knowledge generation, knowledge synthesis, dissemination and the ability of decision-makers to acquire, assess and apply research.

4. HSRI will enhance its research networking and its link to international alliances and partners.

Strategies

There are 4 interrelated strategies which include:

Strategy 1 Knowledge generation for health system development
The objective is to support policy development process based on knowledge, aiming at solving the priority health problems addressed, based on the following measures:

1.1 Generate knowledge for current priority problems

▶ Develop a good governance system covering the following issues: Ministry of Public Health's roles under the new context (after an enforcement of the National Health Act 2007); Health services decentralization (especially decentralization of public hospitals); Participation from civil society and the general public for the system's transparency and accountability; Knowledge covering a system at macro and micro level, and different context which will finally lead to community based health system.

▶ Conduct research studies to support new mechanisms as mandated by the National Health Act 2007 and the National Health Constitution.

▶ Conduct researches to develop proposals on effective and efficient health financing system including establishment of Health Financing Research Unit in the future.

▶ Assess state health policy or policy affected in health in order to reflect the government's decision making.

▶ Conduct researches to solve local health problems focusing on issues of management of health system under local government and community based health care system.

1.2 Generate knowledge for future threats

Knowledge is built as preparedness for future health threats, which are affected by the country's social, economic and environmental changes. Knowledge is important in setting and developing national health policy in accordance with the following possible incidents :-

- ▶ Develop models for chronic care and non-communicable diseases, these two types of which are critical diseases at present and in the future. In addition, health care system for the elderly of which population rate is continually increasing is also needed.

- ▶ Build knowledge, capacity, mechanisms and tools to improve efficiency and quality of the national drug system. This is due to the fact that more than 30% of total health expenditure is on drug and more than 70% of Civil Servant Medical Benefit Scheme outpatient cost is spent on drug with more than 10% annual increase.

- ▶ Build knowledge, capacity, mechanisms and tools to manage health problems incurred from environment which are continually more serious and aggressive.

- ▶ Build knowledge, capacity, mechanisms and tools to manage international health problems especially those affected by WTO, TRIPS and new emerging diseases. For example, SARS-Severe Acute Respiratory syndrome, the first severe new disease of the 21st century, and pandemic influenza, the most feared security threat.

- ▶ Develop a more effective national health research system by calling for setting national health research policy, assigning research team to cope with such policy and allocating appropriate research funds while developing mechanism and ethical criteria to protect human rights in human research.

Strategy 2 Link knowledge to health system development

The objective is to create an effective communication mechanism for delivering information and knowledge on health system to policy makers, academicians and the publics, based on the following measures:

2.1 Liase with academicians and research users Emphasize pro-active collaboration by encouraging relevant agencies to participate in the whole process of research management, starting from identifying research topics, peer review, monitoring of research and etc.

2.2 Develop a computerized database system for health system research To be used by interest groups as well as to be publicized to the public. Information consists

of list of health system researchers with their research studies (both supported by HRSI and other organizations), researches on health system, updated information on movements and development on health system, database obtained from health system researches which could be used for further analysis.

2.3 Develop effective communications at all levels: Develop a proper mechanism on knowledge communications to different target groups ranging from mass communication (such as using mass media when communicating to the public) by linking with hot issues (using existing knowledge source); conference or academic platform to encourage use of information in a close communication (such as conference held to present research to relevant members). In addition, HSRI's mechanism and media should be improved as follows :-

- ▶ Set up an internal structure on knowledge communications and social movement. This unit acts as a coordinator with other private and public, research or policy agencies namely, the Ministry of Public Health, Office of Higher Commission, Public Health Committee of the Low Parliament and political parties to jointly drive national health policy
- ▶ Develop "Journal of Health Systems Research" so that it can be used as an effective channel to publicize health system research studies and findings (both supported by HRSI and other organizations).
- ▶ Develop an interactive website which provides a reliable information and knowledge source for the interest groups.

Strategy 3 Strengthen knowledge management system

The objective is to encourage HSRI and its alliances to manage researches based on good governance practices and emphasize at using knowledge for health policy formulation, based on the following measures:

3.1 Capacity building of the institution, its alliances and its manpower by strengthening academic and research management capability of the institute, its alliances and its manpower through a process of training, sharing experience and regular academic platforms/ journal clubs/ workshops.

3.2 Promote and support a good governance research management system of the institute and its alliances by standardizing implementation process to be transparent and accountable with regular assessment from internal and external bodies.

3.3 Encourage a collaborative networking to create solidarity in order for achieving HSRI's goals and to synthesize "new system knowledge" and/or "innovation" deriving from researches integration (of HSRI alliances) and put it forward to public policy/issue.

Strategy 4 **Expansion of strategic allies and partners.**

The objective is to expand HSRI's research networks and a link with national and international alliances, based on the following measures:

4.1 Develop new research networks in the following new research areas for example good governance for health system, health and environment, drug system, etc.

4.2 Encourage and support "routine to research - R2R" network in different organizations with an emphasis on community hospitals, provincial hospitals and general hospitals in order to build research capacity of its personnel and create collegial atmosphere to use the knowledge for problem solving (develop personnel's research potentiality and create knowledge use in problem solving and health system development)

4.3 Create innovative research and development plan in which building capacity of the institution and manpower is taking into account.

4.4 Stimulate and promote collaborative researches at all levels especially for joint studies between local, national, regional and international organizations/ researchers. Options are a request on international research funds or co-funding and working collaboratively on priority health threats that affected the country, the region and the globe.

Summary of HSRI Strategic Plan, 2008-2010

Vision *"Better knowledge management for better health system"*

Mission Manage knowledge to strategically support health system development by working cooperatively with research alliances and engagement of stakeholders including civic group

Goals Strengthening Thai health system

4 Objectives

▶ support evidence-informed policy decision-making, including the synthesis of issue-focused policy briefs and deliberations.
▶ create effective communication at all levels, and focus on the research/policy interface and dialogue.
▶ generate / manage researches based on good governance and build capacity at both the individual and institutional levels.
▶ expand its research networking and its link to international alliances and partners.

4 Strategies, 11 measures

1. Knowledge generation for health system development
   ▶ Generate knowledge for current priority problems
   ▶ Generate knowledge for future threats
2. Link knowledge to health system development
   ▶ Liase with academicians and research users
   ▶ Develop a computerized database system for health system research
   ▶ Develop effective communications at all levels
3. Strengthen knowledge management system
   ▶ Capacity building of the institution, its alliances and its manpower
   ▶ Promote and support a good governance research management system
   ▶ Encourage a collaborative networking
4. Expansion of strategic allies and partners.
   ▶ Develop researcher networking
   ▶ Encourage and support "routine to research - R2R" network
   ▶ Create innovative research and development plan
   ▶ Stimulate and promote collaborative researches at all levels especially for joint studies between local, national, regional and international organizations/researchers.

HSRI Alliances

1. Addiction Knowledge Management Project
2. Center for Alcohol Studies
3. Central Office for Healthcare Information
4. Clinical Research Collaboration Network
5. Health Information System Development Office
6. Health Insurance System Research Office
7. Health Intervention and Technology Assessment Program
8. Health Promotion for People With Disability Program
9. Human Resources for Health Research and Development Office
10. Institute for the Development of Human Research Protections
11. Institute of Community Based Health Care Research and Development
12. International Health Policy Program, Thailand
13. Medical Record Audit
14. National Health Commission Office
15. National Health Examination Survey Office
16. North-East-Health Systems Research Institute, Khon Kean University
17. Northern-Health Systems Research Institute, Chiang Mai University
18. Pharmaceutical System Research & Intelligence Center
19. Popular Health Communication System Research and Development
20. Research and Development Program on Healthy Public Policy and Health Impact Assessment
21. Society and Health Institute
22. Southern-Health Systems Research Institute, Prince of Songkla University
23. Thai Health Institute
24. The Institute of Hospital Quality Improvement & Accreditation

The Critical Challenge:
How to strengthen the national health system
in the Thai context?